104/1

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires March 31, 2012

Important: Read the instructions on pages 1-9.

	or Insurance Company Use:
1. Building Owner's Name THEODORE AND ANDREA ROTHMAN	öllgy Number
3403 ATLANTIC AVENUE	ampany NAIG Number
City LONGPORT State NJ ZIP Code 08403	4.455
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BLOCK 104 - LOT 1	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latitude/Longitude: Lat. 39 19' 04" Long. 074 31' 04" A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 1-A	☐ NAD 1927 ⊠ NAD 1983
A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade c) Total net area of flood openings? Total net area of flood openings? Yes No A9. For a building with an attached as Square footage of attached by No. of permanent flood open within 1.0 foot above adjacent grade g and a sq in c) Total net area of flood openings of the companion of th	d garage <u>NA</u> sq ft enings in the attached garage ent grade <u>Q</u> enings in A9.b <u>Q</u> sq in
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	
LONGPORT 345302 ATLANTIC COUNTY NEV	State W JERSEY
0001 B Date Effective/Revised Date Zone(s) 8/12/70 8/15/83 A-8	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10.00'
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in item B9. FIS Profile FIRM Community Determined Other (Describe) B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date CBRS OPA	☐ Yes ☒ No
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED	
C1. Building elevations are based on: Construction Drawings* Building Under Construction* *A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, A below according to the building diagram specified in Item A7. Use the same datum as the BFE. Benchmark Utilized RM-4 Vertical Datum NGVD 1929 Conversion/Comments Check the measurement	
W feet ☐ meters (Puerto R	
b) Top of the next higher floor 18.69 ⊠ feet ☐ meters (Puerto R	Rico only)
c) Bottom of the lowest horizontal structural member (V Zonos only): NA.	rico only)
e) Lowest elevation of machinery or equipment servicing the building *9.54	tico only)
f) Lowest adjacent (finished) grade next to building (LAG) 7.24 ⊠ feet ☐ meters (Puerto R	
g) Highest adjacent (finished) grade next to building (HAG) 8.90 ☑ feet ☐ meters (Puerto R h) Lowest adjacent grade at lowest elevation of deck or stairs, including NA. ☑ feet ☐ meters (Puerto R structural support	17/1
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION	
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.	
☐ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☐ Yes No	_
Certifier's Name DANIEL J. PONZIO, SR. License Number G\$37603 Title LAND SURVEYOR: Company Name ARTHUR W. PONZIO CO. & ASSOCIATES, INC.	
Title LAND SURVEYOR Company Name ARTHUR W. PONZIO CO. & ASSOCIATES, INC. Address 400 NORTH DOVER MENUE City ATLANTIC CITY State NJ ZIP Code 08401	- 3
Signature Date 8/31/09 Telephone 609-344-8194	
See reverse side for continuation.	Replaces all previous editions

In the second se	ny the corresponding info	rmation from Sec	tion A.	For Insurance Company Use:
MPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bidg, No.) or P.O. Route and Box No.			Policy Number	
3403 ATLANTIC AVENUE City LONGPORT State NJ ZIP Code			A STATE OF THE STA	Gompany NAIC Number
- A		OD ADOUTECT	CERTIFICATION (CONTINUED)
SECTION	SURVEYOR, ENGINEER	, OR ARCHITECT	CERTIFICATION	O DAIDEL
Copy both sides of this Elevation Certific	T PROJECT #30022) insurance ageni/cui	mpany, and (5) bunding	g Switch.
omments * AIR CONDUMENT OF GRANT	L BROJECT #200%			
	No.			
and Hell for		_		
GAMEN IN THE	1/	Date 8/31/		Check here if attachment
ACCUTANTE AND DING ELEVI	ATION INFORMATION (SUI	RVEY NOT REQU	IRED) FOR ZONE	AO AND ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), con and C. For Items E1-E4, use natural gr				
E1 Provide elevation information for ti	he following and check the appro	opriate boxes to show	w whether the elevation	п is above or below the highest adjacent
mends (LIAC) and the levice disc	ent drade (LAG).		☐ feet ☐ meters	s 🔲 above or 🔲 below the HAG.
a) Top of bottom floor (including b. b) Top of bottom floor (including b.	asement, crawispace, or enclos	ure) is	Treat Treater	s \square shove or \square below the LAG.
52 For Building Disgrams 6-9 with pe	rmanent flood openings provide		8 and/or 9 (see pages above or below	8-9 of Instructions), the next higher floor w the HAG.
(elevation C2.b in the diagrams) o E3. Attached garage (top of slab) is	feet I m	etere ahove or	Delow the HAG.	
	will	lina le	Tifeet Timeters] above or [] below the HAG.
	umber le available is the ton of	the bottom floor elev	SING ILI SICCOLDANCE MIL	th the community's floodplain managemen
ordinance? Yes No	F - PROPERTY OWNER (O	D OWNER'S REP	RESENTATIVE) CE	RTIFICATION
SECTION		s Sections A. B. and	E for Zone A (without	a FEMA-issued or community-issued BFE
he property owner or owner's aumorized a Zone AO must sign here. The statem	nents in Sections A, B, and E an	e correct to the best	of my knowledge.	467
Property Owner's or Owner's Authorized	d Representative's Name			
Address	AND THE PARTY NAMED IN COLUMN TO THE PARTY NA	City	Sta	ate ZIP Code
Signature		Date	Te	lephone
	- Aller		14,574	Attables
Comments	4,4			A SECURITY S
			A STATE OF THE STA	☐ Check here if attachme
	SECTION G - COMMI	JNITY INFORMAT	ION (OPTIONAL)	The Sections A B C (or E)
ne local official who is authorized by law nd G of this Elevation Certificate. Comp	or ordinance to administer the	community's floodple sign below. Check th	in management ordina ie measurement used	nce can complete Sections A, B, C (or E) in Items G8 and G9.
		tion that has been sin	med and sealed by a li	icensed surveyor, endineer, or architect wi
is authorized by law to cettify a	slevation information, (Indicate t	ne source and date of	y fric cicastion date in	THE COMMISSION OF THE POLYMAN
2. A community official completed	I Section E for a building located	in Zone A (without t	somest sumages	munity-issued BFE) or Zone AO.
Late A Society	ns G4-G9) Is provided for commu			Compliance/Occupancy Issued
G4. Permit Number	G5. Date Permit Issued		6. Date Certificate Of	Compliance/Occupancy leaded
7. This permit has been issued for:	☐ New Construction ☐	Substantial Improv	ement	
8. Elevation of as-built lowest floor (inc	Squared		feet meters (PR)	
9. BFE or (in Zone AO) depth of flood			feet meters (PR)	
10. Community's design flood elevation			feet meters (PR)	Datum
Local Official's Name	A STATE OF THE STA	Title	_025	
Community Name		Teleph	one	And the state of t
Signature	A THE STATE OF THE	Date	A AMERICAN	A STATE OF THE PROPERTY OF THE
Comments				WY
AL CAMPUT.			AP CASE	☐ Check here if attachm
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EMA Form 81-31, Mar 09				rehiades an hierions equ

FEMA Form 81-31, Mar 09